

<div style="font-size: 24px; font-weight: bold; margin-bottom: 10px;">CLAIMS ONLY</div>				<div style="font-size: 12px; font-weight: bold; margin-bottom: 5px;">Application Number</div> <div style="font-size: 24px; font-weight: bold; margin-bottom: 5px;">09/859638</div>		<div style="font-size: 12px; font-weight: bold; margin-bottom: 5px;">Filing Date</div>	
				<div style="font-size: 12px; font-weight: bold; margin-bottom: 5px;">Applicant(s)</div>			
<div style="font-size: 18px; font-weight: bold; margin-bottom: 5px;">8-11-04</div>				<div style="font-size: 10px; font-weight: bold; margin-bottom: 5px;">* May be used for additional claims or amendments</div>			
CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
		Indep	Depend	Indep	Depend	Indep	Depend
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Indep							
Total							
Depend							
Total							
Claims							

8-11-04

* May be used for additional claims or amendments

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Total
Indep
Total
Depend
Total
Claims

09/859638

Filing Date

Applicant(s)

8-11-04

* May be used for additional claims or amendments